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# CHARACTERISTICS OF MEDICALLY DISQUALIFIED AIRMAN APPLICANTS IN CALENDAR YEARS 1975 AND 1976

## I. Introduction.

The Federal Aviation Administration (FAA) and its predecessor, the Civil Aeronautics Administration, have been charged with the responsibility for medical certification of all United States and some international civil airmen since 1927. Except for certain categories of airmen such as glider and balloon pilots, each airman must hold a current, corresponding class of medical certificate for performing the duties of any pilot certificate he may possess. Federal Aviation Regulations stipulate that a first-class physical examination must be performed at 6-month intervals for duties requiring an air transport pilot certificate; a second-class physical examination must be performed annually for duties requiring commercial pilot certificates, an air traffic control tower operator certificate, etc; and, a third-class physical examination must be performed at 2-year intervals for duties requiring a private pilot certificate. Different medical standards apply to the different categories of medical certification.

Medical certification criteria will continue to change as a result of the evolution of aviation medicine and increased efforts in the area of aeromedical research.

Previous studies (1,2,3) that provided descriptive data concerning airmen who were denied medical certification have proved to be of great value. Numerous questions have been answered for the FAA and the aviation community concerning these airmen. Comprehensive data reflecting pertinent denial rates with respect to the medical and general attributes of those airmen denied medical certification are needed for program monitoring with respect to workload information, aeromedical standards, appeal system appraisal, research direction, and risk determinations by the aviation community. Of course, the primary purpose of these efforts continues to be the promotion and enhancement of aviation safety through medical program data analysis.

This study provides comprehensive data reflecting pertinent denial rates with respect to the medical and general attributes of those airmen denied medical certification in calendar years 1975 and 1976. Comparisons to 1973-1974 findings are also made. Also provided are such descriptive epidemiologic data as age, sex, occupation, class

of medical certificate applied for, total flying time, and cause-specific annual denial rates for medically disqualified applicants. Data on airline pilot denials are also included.

# II. Methods and Source.

The Aeromedical Certification Branch of the Civil Aeromedical Institute is the central screening facility and repository within the FAA for the collection, processing, adjudication, investigation, and analyses of medical data generated by the aeromedical certification and related regulatory programs.

The Aeromedical Certification Branch's computerized medical records provide historical data both for daily screening of document input and for statistical/research purposes. The "active master file" contains the most recent record within the past 3 years of an airman's medical application for certification. This file includes applications issued, pending, or denied and abbreviated records of significant pathology cases retained indefinitely for further medical reference in the event an inactive airman decides to again exercise his flying privilege.

The denial data were obtained from computer files as of July 1, 1976, for calendar year (CY) 1975 applicants and July 1, 1977, for CY 1976 applicants. The 6-month time lapse was allowed to assure that final certification action had been taken in the majority of cases. The data were summed for the 2 calendar years to provide a larger group for comparison with the active airman population.

A medically certified airman is considered "active" for a maximum of 24 calendar months following the most recent FAA medical examination; i.e., regardless of the class of medical certificate issued, it is valid for third-class purposes for 24 calendar months unless otherwise limited or recalled by the FAA.

The active airman population as of December 31, 1975, was used as the population base for rate computation. This population was used since it is the midpoint for the denied applicant group.

Data from the most recent medical record were selected and extracted from the active master file for construction of the various frequency tables presented in this study.

Data presented are descriptive in nature, and appropriate population comparisons are made via conventional statistical methodology where compatible data exists and statistical treatment would be meaningful.

Annual rates were computed to provide data more useful for answering the many questions received concerning airmen denied medical certification. In CY 1975 and 1976, 12,112 airmen were denied medical certification for various medical and/or administrative reasons; e.g., failure to provide additional medical information. The frequency tables that follow were compiled based on data extracted from these airmen's medical records and comparable data extracted from the active airman population as of December 31, 1975. The active population at that time totaled 763,793 airmen.

A copy of the application for medical certification is provided for reference to block numbers cited in the following discussion.

Age of denied airmen was computed to last birthday as of the date of the physical examination. Age of the active population airmen was computed to last birthday as of December 31, 1975. Date of birth is provided by the airman in block 3 of the medical application form, and computer edits assure a reasonable month, day, and year.

Class of certificate applied for is determined from information supplied by the applicant in blocks 9A and 9B (Class of Medical Certificate Applied For and Type of Airman Certificate(s) Held) of the application.

In many areas, accuracy of data is contingent upon the completeness and accuracy of information supplied by the airman applicant. Other data are coded by Aeromedical Certification Branch personnel. Some human error is recognized but is not considered significant enough to seriously bias the data provided in this study.

Some airmen who hold first-class certificates will have applied for medical certification four times during the 2-year period, some airmen who hold second-class certificates will have applied twice, and airmen with third-class certificates will have applied once. However, rate data are provided for the number of applicants versus the number of applications, except for a portion of Table 1. The active master file provides applicant data because it contains only the most recent examination of an airman. Both the denial data and the population data are maintained on the active master file.

Previous examination data were determined by whether the applicant entered a date in block 20 of the application form and a "match" was made to a previous examination on the active master file. If the applicant indicates a previous FAA examination has been performed, a notification will be received by medical review personnel if the previous examination cannot be located on the active master file with the

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Figure 1a. FAA Form 8500-8 (front) - Application for Medical Certification

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Figure 1b. FAA Form 8500-8 (back) - Report of Medical Examination.

same control data information (last name, first initial, date of birth, and SSN). This action helps to assure accuracy of the control data by providing manual review of the medical record.

Occupation is coded from information furnished by the applicant in block 10 of the application form. Only aeronautical occupations are coded for input to the automated system. If the item is left blank by the applicant and cannot be determined from other information provided on the examination, the occupation is entered as "nonaeronautical."

The cause for denial was determined by the presence of an alpha prefix to a specific pathology code. The prefix and code are assigned by medical review clerks in the Aeromedical Certification Branch. Internal computer edits assure logical assignment of such prefixes and pathology codes. These edits are applied when initial file maintenance to an airman's record is made and again at the end of each quarter to eliminate discrepancies in pathology and denial data on the active master file. Data presented regarding pathology represent conditions cited as cause for denial, not applicants. Some airmen denied medical certification for legal or administrative reasons or for failure to provide additional medical information would not necessarily have a pathology code assigned. There are also airmen who are denied for more than one cause.

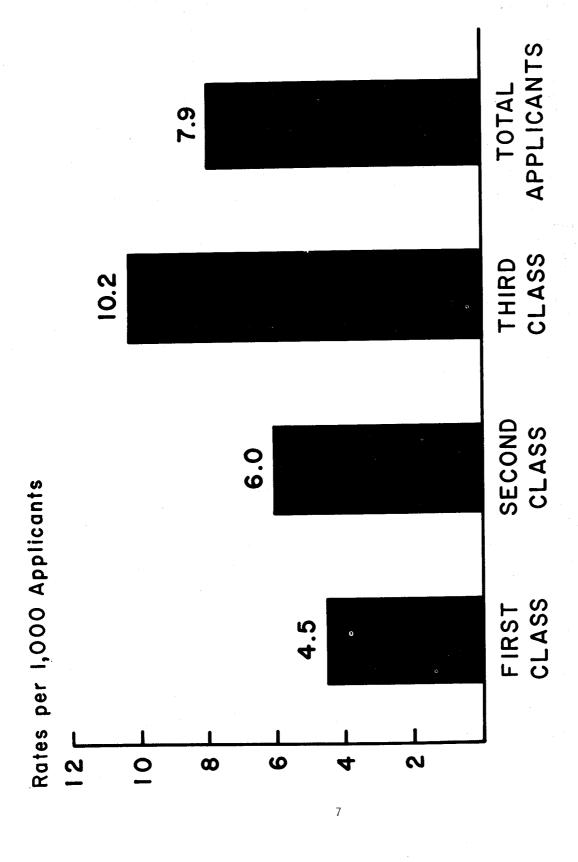
# III. Findings and Discussion.

# A. General Comments

As of December 31, 1975, there were 763,793 active airmen in our automated system; 77,466 held first-class medical certificates, 307,528 held second-class certificates, and 378,799 held third-class certificates. In CY 1975 and 1976, 12,112 airmen were denied medical certification. The annual denial rate based on airman applicants is, therefore, 7.9 per 1,000 airmen. During the same 2-year period, 1,052,476 FAA physical examinations were performed giving a denial rate per 1,000 applications of 11.5.

The annual denial rate per 1,000 applicants is 4.5 for first-class, 6.0 for second-class, and 10.2 for third-class certification.

In the previous study of CY 1973-1974 applicants (3), the denial rate per 1,000 applicants was 8.9 and the rate per 1,000 applications was 13.1. It would appear that the per-applicant denial rate is declining. However, this could be attributed to a change in processing "pending" applications on which no additional information is received.



ANNUAL DENIAL RATES BY CLASS OF CERTIFICATE APPLIED FOR, 1975-1976. FIGURE 2. MEDICAL C

In November 1975, an automated procedure was implemented which assigns a denial class code to these "pending" records later than the previous manual system.

# B. Age Distribution of Denied Airmen

Tables 1 and 2 reflect the age distribution and age-specific denial rates by class-applied-for. Table 1 shows that airmen applying for third-class certificates account for 64 percent of all denials, with second-class accounting for 30 percent and first-class applicants only 6 percent.

Denial rates by class-applied-for also indicate that the highest crude rates for denials are applicants for third-class medical certification (general aviation/private or student airmen) with an annual denial rate of 10.2 per 1,000 applicants. Occupationally connected airmen require first- or second-class medical certificates, and denial rates for these categories (4.5 and 6.0 per 1,000 applicants respectively) are substantially lower than the general aviation (third-class) category or the total population denial rate (7.9 per 1,000 applicants). In the previous study, denial rates by class applied for were 11.2 for third-class, 7.1 for second-class, 4.5 for first class, and 8.9 for the total denial population.

Airmen may apply for and obtain any class of medical certificate for which they qualify; however, most new applicants apply for third-class medical certification, consistent with their intended use of the certificate. Firstand second-class medically certified airmen are more likely to be occupationally connected airmen, either on a full time or part-time basis. As such, these airmen are, to some extent, medically purged and denial rates for these two classes are more likely to reflect incidence rather than prevalence of disqualifying pathology among a more stable numerical Applicants for third-class medical certificates are comprised of many new applicants whose medical statuses have not been previously appraised by the FAA (as many as 145,000 for CY 1975 and 1976, or 34 percent of all third-class examinations performed during those years). Only 1 1/2 percent of all first-class examinations and 7 percent of all second-class examinations performed are for new applicants (6). Therefore, the substantially higher denial rate for the third-class group more likely results from a combination of prevalence and incidence of disqualifying pathology than from any recognizable epidemiologic factor. New applicants account for approximately 15 percent of the total applicants for medical certification.

Also shown in Table 1 and Figure 3 are the mean ages for the three class-applied-for-denial groups and the three classissued-population groups. First-class airmen were oldest (denied airmen--47.2, active airmen--38.1); third-class

Table 1. CY 1975 and 1976 Denied Applicants by Age and Class of Medical Certificate Applied For

	First	Second	Third	Total
Age*	Class	Class	Class	
Less than 20	12	37	267	316
20-24	25	304	699	1,028
25-29	34	530	816	1,380
30-34	47	387	638	1,072
35-39	52	397	610	1,059
40-44	64	476	767	1,307
45-49	7 2	414	1,047	1,533
50-54	162	560	1,157	1,879 1,439
55-59	188	395	856	666
60-64	37	138	491	271
65-69	5	44	222	162
70 and over	1	24	137	102
Total Denied	699	3,706	7,707	12,112
Percent of Total Denials	5.8	30.6	63.6	100.0
Total Issued- 1975 & 1976*	183,649	440,660	416,055	1,040,364
Percent of Total Applications Issued	17.6	42.4	40.0	100.0
Total Applications 1975 & 1976*	184,348	444,366	423,762	1,052,476
Denial Rate per 1,000 Applications	3.8	8.3	18.2	11.5
Total Applicants**	77,466	307,528	378,799	763,793
Annual Denial Rate per 1,000 Applicants	4.5	6.0	10.2	7.9
Mean Age of Denied Airmen***	47.2	41.3	42.9	42.7
Mean Age of Active Population Airmen***	38.1	36.6	36.4	36.7

<sup>\*</sup>Examination Computer Submission Summary Reports, RIS: AC 8500-3, Calendar Years 1975 and 1976.

<sup>\*\*</sup>Examination Time Period Summary, RIS: AC8065-4, December 31, 1975.

<sup>\*\*\*</sup>Age as of the date of examination to last birthday.

<sup>\*\*\*\*</sup>Age at last birthday as of December 31, 1975.

Table 2. Age Distribution Comparison -- Active Airmen Vs. CY 1975 and 1976 Denied Applicants

		First Class	288	,	Second Class	Class		Third Class	lass		Total	
		,	Annual Age			Annual Age			Annual Age			Annual Age
Age Group*	Denied Airmen	Active Airmen	Specific Denial Rate**	Denfed Airmen	Active Airmen	Specific Denial Rate**	Denied	Active	Specific Denial Rate**	Denied	Active	Specific Dental Ratex*
Less than 20	12	1,158	5.2	37	5,523	3.3	267	25,280	5.3	316	31,961	4.9
20-24	25	4,907	2.5	304	30,041	5.1	669	58,237	6.0	1,028	93,185	5.5
25-29	34	898'6	1.7	530	60,465	4.4	816	53,689	7.6	1,380	124,022	9.5
30-34	47	16,150	1.5	387	53,516	3.6	638	48,005	9.9	1,072	117,671	9*4
35-39	52	14,385	1.8	397	45,566	4.4	610	40,843	7.5	1,059	100,794	5,3
40-44	<b>79</b>	10,696	3.0	9/4	40,675	5.8	191	39,414	9.7	1,307	90,785	7.2
45-49	72	6,458	5.6	414	25,905	8.0		45,014	11.6	1,533	77,377	6.6
, 50-54 1	162	7,589	10.7	260	24,650	11.4	1,157	34,842	16.6	1,879	67,081	14.0
0 55-59	188	4,978	18.9	395	14,105	14.0		19,408	22.0	1,439	38,491	18.7
79-09	37	1,068	17.3	138	668,4	14.1	491	9,230	26.6	999	15,197	21,9
69-69	S	174	14.4	4	1,590	13.8	222	3,371	32.9	271	5,135	26.4
70 and older	-	35	14.3	54	593	20.2	137	1,466	46.7	162	2,094	38.7
TOTAL	669	77,466	4.5	3,706	307,528	0.9	701,7	378,799	10.2	12,112	763.793	7.9

\*Age as of date of examination to last birthday for denied airmen; age at last birthday as of December 31, 1975, for active airmen.

\*\*Per 1,000 Applicants.

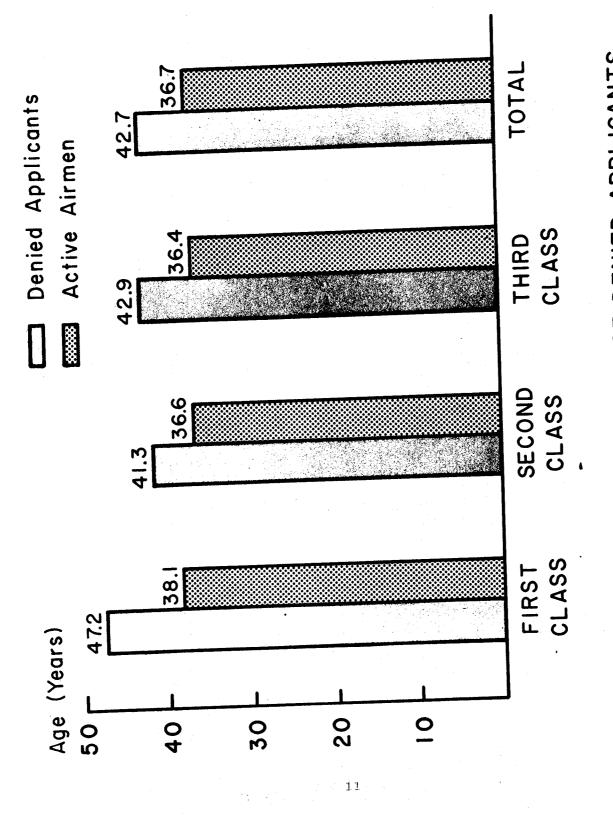


FIGURE 3. AVERAGE AGE OF DENIED APPLICANTS COMPARED WITH ACTIVE AIRMEN.

airmen were the next oldest (denied airmen--42.9, active airmen--36.4); and second-class airmen were the youngest (denied airmen--41.3, active airmen--36.6). The mean age for all denied applicants was 42.7, compared to a mean age of 36.7 for the active airman population. Denied airmen's average age was 6 years older than the active population airmen's average age. The mean age of denied airmen has increased about 2 years for all classes since the 1973-1974 study (3).

Table 2 reflects similar age trends by class of medical certificate; however, age-specific rates were higher for second-class over first-class and third-class over both first-and second-classes. Overall, the age-specific denial rates for the younger age intervals were higher than the 30-34 and 35-39 age intervals. Again, this is attributed to new applicants not having been previously screened by the FAA. At the 40-44 age interval the denial rates again start upward. Second-class, third-class, and total denied airmen rates continue upward from that point reaching the highest age-specific denial rate at the 70-and-older age interval. Whereas, first-class rates go upward from the 45-49 age interval reaching the highest age-specific denial rate at the 55-59 age interval.

# C. Previous Application Status of Denied Airmen

Data contained in Table 3 provide a more detailed break-down of denied airmen by age, class of medical certificate applied for, and whether a previous FAA medical examination was recorded for the individual. This breakdown allows for appraisal of denied airmen by "new applicant" versus "previously certified" status. Comparable data from the active population were not available and denial rates could not be computed. However, trends from the proportional comparisons can be observed and certain assumptions made on the basis of relative contribution to overall denials from the data provided.

For total denied applicants, the ratio of new applicants to previously certified applicants is approximately 1 to 1 (new applicants--45 percent; previously certified applicants--55 percent). However, within the three classes of medical certification, a different picture emerges. Approximately 86 percent of the first-class denials and 74 percent of the second-class denials were previously certified airmen. In sharp contrast to the relationship existing in the first-and second-class categories, more than half (56.7 percent) of the third-class denials were new applicants, with 47.9 percent of these appearing in the "student pilot" category.

Again, this relationship was expected because the first-and second-class categories are normally associated with professional pilots who have been previously medically

Table 3. CY 1975 and 1976 Denied Applicants by Age, Class of Medical Certificate Applied For, and Whether a Previous Examination Was Recorded

									Second Class		Second Class	355	Second Class	Class	Third Class	Class	Third	Third Class				
	i	;				d Class	Second Class	Class	Engineer/ Navigator		Commercial Pilot/ATC		Pilot/ATC	ATC A	Private	ate	Student	dent		Total	_	l
	Fir	First Class		Second Class	ATC		770	7 7 7 7	Previous Examination Recorded**	minati	on Recor	rded**						- 1	- 1		١.	
3	2	O.M.	VPC	ON	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	Percent	ŝ	Percen
Age Group				3.0	-	,	-	,	,	1	,		,	1	٣	5	23	236	36	0.3	280	2.3
Less than 20		9	^	<b>C</b> 7	-	ז	4				:		*	-	ŭ	0	96	526	288	2.4	740	6.1
20-24	7	18	89	70	23	101	21	m	Ī		11	<b>-</b>	4	7	9	<b>.</b>	2 1		2 5		1 .	, ,
25-29	17	17	133	95	87	129	15	<b></b> 1	1	ı	35	2	59	ന	92	81	86	609	210	7.4	0/0	7.
30-37		12	138	79	93	23	5	ı	1	ı	43	2	17	٦	120	35	75	408	527	7.7	545	4.5
יים אל היים אל	, ,		168	59	92	12	12		1	,	39	٦	12	1	147	38	81	344	265	4.9	462	ى ھ
65-65	, ,		202	73	133	œ	7	٦	1	П	32		20	1	224	62	86	383	773	6.4	534	4.4
40-44	60	,	707	2 6	0 0	ıc	c		ď	ı	37	3	18	1	409	108	101	429	923	7.6	610	5.0
67-57	9	,	199	20	6	v (	1 (		, ,	-	65	~	16		537	173	89	358	1,229	10.1	650	5.4
50-54 م	145	17	271	83	96	×	n	, .	~ 1	4	3 2		-	-	7.38	115	7.1	232	1.001	8.3	438	3.6
55-59	185	3	216	42	67	e		_	n	ı	<del>5</del> 7	<del>1</del>	ζ,	4	2 1	1 5			77.7		191	7
<del>79-09</del>	37		92	24	13	,	•	1	-		7	,	-		6/7	2 3	ĵ.	<u> </u>	7 7			
65-69	7	.4	42	2	•	•	•		1			1	•	ı	143	54	61	36	207	· · ·	ĉ :	
70 and older	ı		21	e		•	•			,	•		1		82	19	∞	22	115	6.0	/4	4.0
TOTAL	603	3 96	1,555	636	674	296	63	8	22	e	293	17	130	6	2,538	619	804	3,686	6,682		5,430	
1			0 67	17.3	6	0.8	1.7	0.2	9.0	÷.	7.9	0.5	3.5	0.2	32.9	8.8	10.4	47.9	55.2		44.8	ļ
Percentwa	- 1	80.3 13.7	7.71	1		,																

\*\*The date, if any, in Block 20, FAA Form 8500-8, indicates whether a previous examination was recorded. \*\*\*Percentages provided are within the three major class applied for categories (first, second, third).  $\star Airman's$  age as of the date of examination to last birthday.

appraised by the FAA, whereas new pilots are more likely to make application for third-class medical certification.

This relationship is further substantiated, as previously discussed, in that 34 percent of all third-class, 7 percent of all second-class, and 1 1/2 percent of all first-class examinations performed in 1975 and 1976 were "new applications."

#### D. Occupations of Denied Airmen

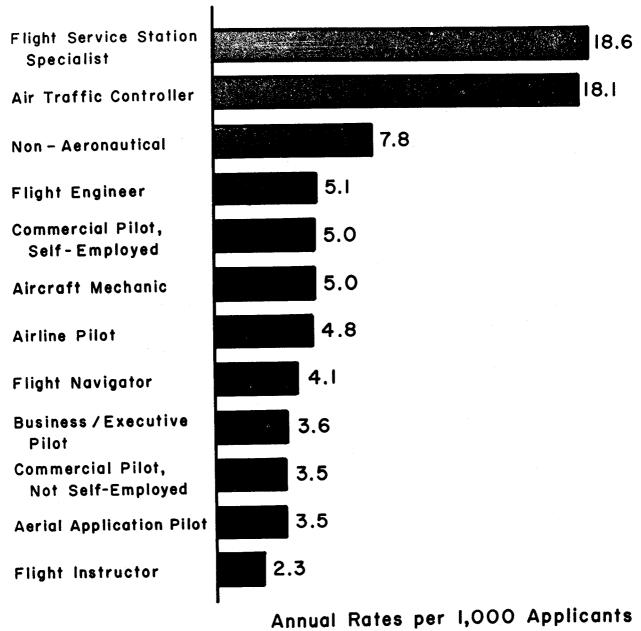
The majority of denied airmen are not occupationally connected with aviation (see Table 4). Eighty-two percent of all denied airman applicants indicated nonaeronautical occupations on their application. These applicants yield an annual denial rate of 7.8 per 1,000 applicants. The largest denial percentages of applicants occupationally connected to aviation was the 11 percent among air traffic controllers (ATCs). The ATC category also experienced the second highest overall annual denial rate (18.1 per 1,000 applicants). The flight service station specialists (FSS) category experienced the highest denial rate (18.6 per 1,000 applicants). Of these occupationally connected airmen, flight engineers, selfemployed commercial pilots, and aircraft mechanics had the next highest rates (5.1, 5.0, 5.0 respectively). Airline pilots had the sixth highest rate of 4.8 per 1,000 applicants (see Table 4 and Figure 4). Only 2.7 percent of the total denials were in the airline pilot occupation category. All of the other occupation categories combined represented less than 5 percent of total denials.

These findings are consistent with previous experience as to denial data by occupation (3).

#### E. Total Flying Time of Denied Airmen

Flying time data further emphasize the contribution of new applicants to total denials. Table 5 and Figure 5 show total civilian flying time as recorded by the applicant on his denied application for medical certification. Fifty-one percent of the denied airmen indicated less than 40 hours total flying time (the number of hours required for a private pilot's license). Thirty-two percent of these airmen indicated no flying time. Of course, some of these airmen indicating no hours flown, as many as 1,041, are strictly air traffic controllers (see Table 3). However, if the 1,041 controller denials are subtracted, the remainder still indicates that new pilot applicants are the major contributor to total denials. The "less than 40 hours flying time" category still equals 42.3 percent when the "air traffic controller only" figure is subtracted.

The next largest percentage of denials occurs at the "more than 1,000 hours" interval (16.7 percent) followed by the "100-299 hours" interval (12.5 percent).



Annual Rates bei 1,000 Approun

FIGURE 4. ANNUAL DENIAL RATES BY OCCUPATION, 1975-1976.

Table 4. CY 1975 and 1976 Denied Applicants by Occupation and Class of Medical Certificate Applied For\*

First Occupation Class Pilot, First-Glass Airlines Only 328 Flight Engineer 6 Flight Navigator/		Second	Second	Second Class	Class	Class	Third	Third	Total	Tota1	Annual Rate
ass r/	Second Class	Class ATC-CIV/FAA	Class ATC-Military	Engineer/ Navigator	Commercial Pilot/ATC	Pvt. or Stu. Pilot/ATC	Class Private	Class Student	Denied Airmen	Active Airmen**	per 1,000 Applicants
/ L	2	• 1	1	,	7	ı	ı	•	329	34,536	4.8
Flight Navigator/	12	ı	•	22	,	ı	t	ı	40	3,877	5.1
Radio Operator	•	ı		rel	•	,	,	1	1	123	4.1
Pilot, Business or Executive 121	ĸ	1	1	1	•	,	ı	1	124	17,387	3.6
Commercial Pilot, Self-Employed	30	•	•	ı	•	1	2	1	33	3,317	5.0
Commercial Pilot,	91	•	,	ı	1	•	ı	1	91	13,031	3.5
Aero Application 1	22	1	•	•	1.	•	ı	1	23	3,247	3.5
Air Traffic Controller	ĸ	873	7.1	ı	273	119			1,341	37,129	18.1
Flight Service Station Specialist	1	92	,	ı	34	23	1	1	150	4,042	18.6
Flight Instructor 6	26	1	ı	1	1	1	1		33	7,181	2.3
Aircraft Mechanic 4	25	-	•	•	1	•	12	7	67	4,860	5.0
Non-Aeronautical or Not Given 232	1,978	4	1	7	2	1	3,200	4,480	868,6	635,063	7.8
TOTAL 699 Percent 5.8	2,191 18.1	970 8.0	71 0.5	25 0.2	310 2.5	142 1.2	3,216 26.6	4,488 37.1	12,112 100.0	763,793	7.9

\*Blocks 9A and B, FAA Form 8500-8, determine class applied for.

\*\*As of December 31, 1975.

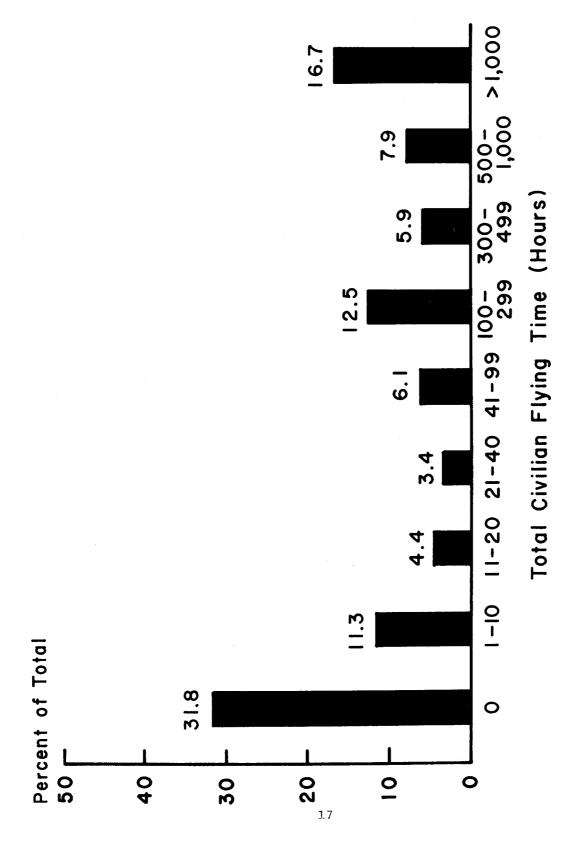


FIGURE 5. RECORDED FLYING TIME OF DENIED APPLICANTS, 1975-1976.

Table 5. CY 1975 and 1976 Denied Applicants by Total Recorded Flying Time

Total Flying Time*		Percent
(Hours)	Number Denied	Of Total
0	3,847	31.8
1 - 10	1,367	11.3
11 - 20	536	4.4
21 - 40	419	3.4
Subtotal	6,169	50.9
41 - 99	742	6.1
100 - 299	1,516	12.5
300 - 499	711	5.9
500 - 1,000	949	7.9
More than 1,000	2,025	16.7
Subtotal	5,943	49.1
TOTAL	12,112	100.0

<sup>\*</sup>The total civilian flying time recorded in Block 16, FAA Form 8500-8, determines total flying time.

### F. Medical Characteristics of Denied Airmen

Tables 6 and 7 and Figure 6 provide annual cause-specific denial data, per 10,000 applicants, by class of medical certificate applied for and sex. In Table 6, one can observe an increasing denial rate for third-class over second-class and for second-class over first-class. is also true for the cause-specific rates except in the ear, nose, throat, and mouth, and neuropsychiatric categories where the second-class rates are larger than the first- and thirdclass rates; and, first-class rates are larger than the secondand third-class rates in the bones and joints category. most significant causes for denial (regardless of class applied for) are cardiovascular (with an annual denial rate of 33.1 per 10,000 applicants); the miscellaneous category, which includes endocrinopathies, general systemic conditions, use of disqualifying medications, and administrative denials for failure to provide additional medical information (with an annual denial rate of 28.3 per 10,000 applicants); and neuropsychiatric (with an annual denial rate of 19.4 per 10,000 applicants). Eye pathology is next in importance at a substantially lower rate. These findings are essentially the same as the findings of the study of 1973/1974 applicants (3).

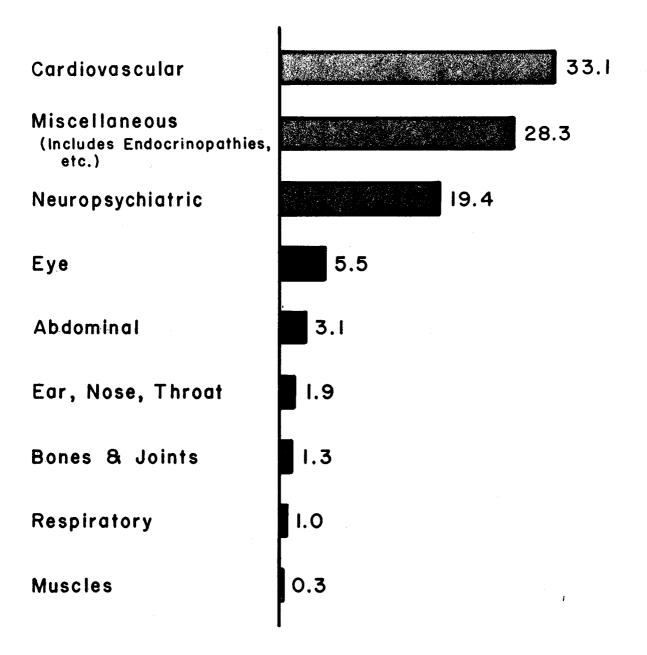
Administrative denials for failure to provide additional medical information represent a large portion of the denials in the miscellaneous pathology category. Of the 4,318 denials in this category, 1,496 or 34.6 percent were for failure to provide additional medical information.

As shown in Table 7, cause for denial by sex indicates that males were most frequently denied for cardiovascular reasons, second for miscellaneous causes, and third for neuropsychiatric reasons. Females, however, were most often denied (40 percent) for miscellaneous causes (the majority of denials in this category were for failure to provide additional information), followed by neuropsychiatric reasons, then cardiovascular reasons. These findings are the same as in the previous study of 1973/1974 applicants (3). However, for all denied applicants, four pathology categories (cardiovascular, miscellaneous, neuropsychiatric, eye) account for more than 90 percent of all denials.

The female population also experienced a higher overall denial rate (99.8 per 10,000 applicants) than did the male population (93.4 per 10,000 applicants).

#### G. Airline Pilot Data

Observations of the airline pilot group probably come the closest to a true reflection of incidence of disqualifying disease as is possible to observe from the data available.



Annual Rates per 10,000 Applicants

FIGURE 6. CAUSE FOR APPLICANT DENIAL BY MAJOR BODY SYSTEM, 1975-1976.

Table 6. Cause For Denial of CY 1975 and 1976 Denied Applicants by Pathology Series and Class of Medical Certificate Applied For

				01000	щ	Third Class		Total
	E	First Class	٥	Second Class			TO TO OT	Annual Rate ner
	Cause For	Cause For Annual Rate per	Cause For	Annual Rate per	Cause For	Annual Kale per 10.000 Applicants		10,000 Applicants
Pathology Series	Denial* 10.	10,000 Applicants	Deniar.	10,000 Apparents				u
υ- α	30	1.9	259	4.2	547	7.2	836	0.0
Eye		2.1	156	2.5	96	1.3	285	1.9
Ear, Nose, Inroat, and Mouth		8 0	58	6.0	98	1.1	156	1.0
Respiratory	306	19.7	1.304	21.2	3,451	45.6	5,061	33.1
Cardiovascular	33	2.1	191	3.1	253	3,3	477	3,1
Abdominal	רי ני	i σ	1.332	21.7	1,471	19.4	2,956	19.4
Neuropsychiatric		, « «	7-6	1,3	73	1.0	195	1.3
Bones and Joints	v ∞	0.5	11	0.2	22	0.3	41	0.3
Mascrea								
Miscellaneous (Disqualitying Medication, Endocrino-		,		9	676 6	38.8	4,318	28.3
pathies, etc.)	197	12./	7,17	1,01		6	300	8 60
TOTAL	815	52.6	4,569	74.3	8,941	118.0	14,323	23.0
								2 *CA

\*Refers to distinct pathological conditions cited as cause for denial. Data does not represent airman applicants; however, most are denied for a single cause. Some applicants are denied for administrative reasons, e.g., failure to provide required ancillary or history data, may not have a specific pathology code assigned.

CY 1975 and 1976 Denied Applicants by Pathology Series and Sex Table 7.

Pathology Series         Cause For per 10,0 per 10,1 per 10,1 per 10,1 per 10,1 per 10,0	Annual Rate r per 10,000 Applicants	; ;	Appril Date
cause For  benial **  oat, and Mouth  145  4,928  ic  2,759  ts  (Disqualifying	r per 10,000 Applicants	# 0 E	Annuar nace
es Denial** 760 oat, and Mouth 271 145 t,928 tc 2,759 ts 183 S9	Applicants 5 2	cause ror	per 10,000
760 oat, and Mouth 271 145 4,928 3 447 ic 2,759 1 ts 183 39 (Disqualifying		Denial**	Applicants
oat, and Mouth  145  14,928  3  447  ic  2,759  1  ts  (Disqualifying		92	9.5
145 4,928 3 447 ts ts 183 (Disqualifying	7.1 1.9	14	1.8
4,928 447 ic 2,759 ts 183 39 (Disqualifying	1.0	11	1.4
ic 2,759 1 ts 183 (Disqualifying	34.0	133	16.7
ic 2,759 1 ts 183 39 (Disqualifying	3.1	30	3.8
ts 183 39 (Disqualifying	19.1	197	24.8
39 (Disqualifying	83 1.3	12	1.5
(Disqu	39 0.3	2	0.3
Medication, Endocrinopathies, etc.) 3,999 27.	27.6	319	40.1
TOTAL 13,531 93.	93.4	794	8.66

\*Active airman population by sex (male--724,000, female--39,793) as of December 31, 1975.

<sup>\*\*</sup>Refers to distinct pathological conditions cited as cause for denial. Does not represent airman applicants; however, most are denied for a single cause.

This group is essentially purged of any disease prevalence that contributes to higher rates for other groups. Also, due to occupational reasons, these individuals are less likely to voluntarily remove themselves from follow-up observation for known medical conditions which would preclude FAA medical certification.

Conversely, voluntary attrition is a frequent occurrence among non-occupationally connected airmen who recognize that they are not medically qualified and, therefore, are never heard from again by the FAA.

Annual age-specific denial rates increase to the highest rate of 242.2 per 10,000 applicants at the age interval 55-59 (see Table 8). See Figure 8 for the age distribution and average age of denied airline pilots.

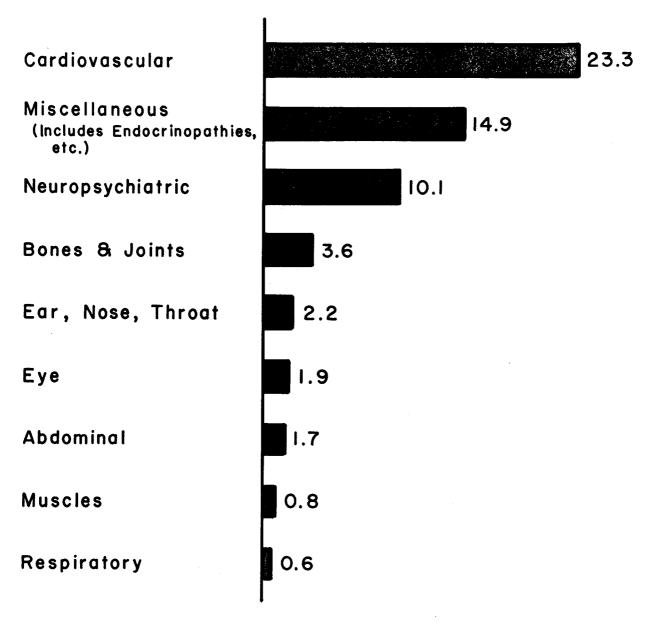
The most significant causes for denial are cardiovascular, the miscellaneous category, and neuropsychiatric, with denial rates per 10,000 airmen of 23.3, 14.9, and 10.1 respectively (see Table 8 and Figure 7). The importance of these categories, particularly over age 45, is again recognized.

# IV. Summary.

This study of CY 1975 and 1976 applicants has provided comprehensive data reflecting pertinent denial rates with respect to the medical and general attributes of those airmen denied FAA medical certification. A similar study is planned every 2 years to monitor any changes in the epidemiologic findings concerning denied airman applicants.

As of December 31, 1975 (the midpoint for the denied applicant group), there were 763,793 active certified airmen. In CY 1975 and 1976, 12,112 airman applicants were denied medical certification, resulting in an overall denial rate of 7.9 per 1,000 applicants. By class of certificate applied for, the denial rate was 4.5, 6.0, and 10.2 per 1,000 applicants for first-, second-, and third-class respectively.

As expected, the mean age of the denied airmen group was higher (by 6 years) than the mean age of the active airman population group but was consistent with previous findings. Age-specific denial rates for the younger age intervals were higher than for the 30-34 and 35-39 age intervals. This can be attributed to new applicants not having been previously screened by the FAA. At the 40-44 age interval the denial rates start upward, with the highest overall rate at the 70-and-older interval.



Annual Rates per 10,000 Applicants

FIGURE 7. CAUSE FOR DENIAL OF AIRLINE PILOTS BY MAJOR BODY SYSTEM, 1975-1976.

Table 8. Cause for Denial of CY 1975 and 1976 Denied Airline Pilots By Age and Pathology Series

																				Annual	
			•		A		Annual		Annual		Annual		Annual	í	Annual	4	Innual	Am	usl	Age-	
			Annual		Amina.		Denial		Denial		Denial		Denial		Denial	I	Denial	Der	ial	Specif	2
			Denial	2000	Dentat		Rathe		Rates		Rates		Rates	Bones	Rates	4	Rates	Rat	ses	Denial	Percent
	:		Kares	Ear, Nose,	Dor Dor	Doenfroe		Cardio-			Per	Neuro-	Per	and	Per		Per	Ā	ī	Rates	per of
	Active	9	Per	Inroat,	1000	rota	000 01	vascular	10.000	Abdominal	10,00	0 psychiatric 1	10,000	Joints	10,000	fuscies	10,000 M	disc. 10	10,000 Misc. 10,000 10,0	10,000	10,000 Total
	Airline	200	000,01	ATIC MOULII	44	(0)		(004)	Airmen	(200)	Airme	(009)	Airmen	(200)	1	(800)	Airmen	(900) A13	men Tota	l Airmen	Denials
Age Group*	Pilots		Alrmen	1337	VIIII III		1				١.			,				,	'	•	•
20-24	259	•			•	1	•		,	•	•	•	•	1				•	-	3.5	
25-29	1,441	•	•		•			٠.	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	•	•	æ	5.7		•		,	4 3	.8	9.5	
30-34	5,252	•			ı	•				·	1.3		2,4	-4	9.0			9	.8 26	16.8	
35-39	7,760	7	1.3					n a	, ,		8.0	. 40	6.4		8.0	-	8.0	11 8	.9	28.4	
<del>\$1</del> -05	6,166	m	7.4	7	٠,٠	٠,	•	, :			;	•	12.8	9	9.6		•	12 17	.1 48	68.4	
45-49	3,507	•	•	m	4 ·	-	†:†	7.7	100	٠	7 6	, 4,	31.9	7	8.6	-4	1.2	27 33	.1 108	132.5	
50-54	4,076	•	•	4	4.0	: (	, ,	1 5	300	4 W	i «	2 =	17.6	. 00	14.0	7	3.5	29 50	.9 138	242.2	36.9
55-59	2,849	7	12.3	'n	×.×	7		2 "	8 29	٠	6.10	٠ :		•	•	,	21.9	2 43	6.	153.5	
<del>79</del> -09	228	1			• •			n -	416.7*		;		•		•	1	•	1	_	416.7	
62-69	12	•				1		•													
TOTAL	31,550	12		71		4		147		n		49		23		5		\$	374		
Percent of Total Denials		3.2		3.7		1.1		39.3		3.0		17.1		6.2		1.3		25.1			100.0
Annual Cause-Specific Denial Rates per 10,000 Airmen	Ħ		1.9		2.2		9.0		23.3		1.7		10.1		3.6		8.0	14	14.9	6.8	

\*Age as of date of examination to last bitthday. Airline pilots were determined by the combination of having a first-class medical certificate issued within the past 13 months and an occupation of "pilot for an airline".

\*\*The high rate per 10,000 noted for this cell is the result of small numbers effect.

Source: Civil Aeromedical Institute, Aeromedical Certification Branch, Medical Statistical Section.

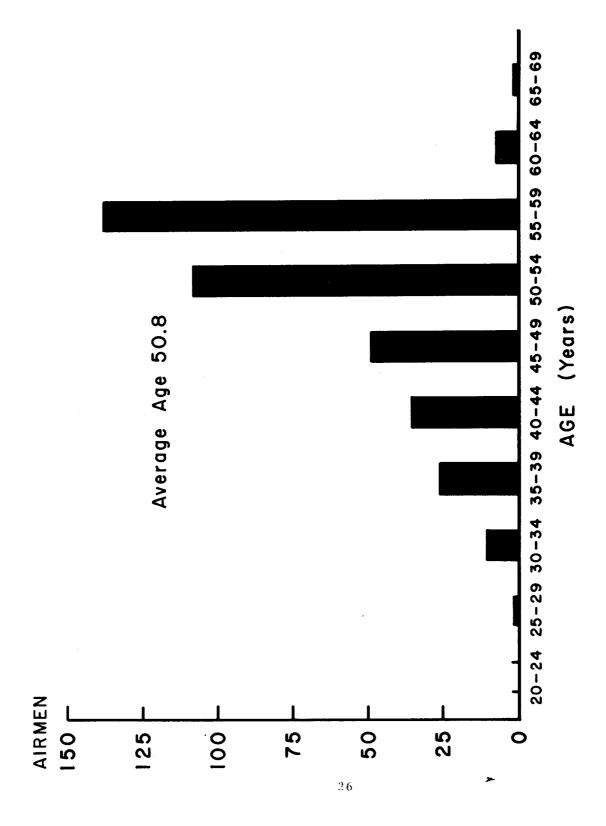


FIGURE 8. AGE DISTRIBUTION OF DENIED AIRLINE PILOTS, 1975-1976.

As anticipated, general aviation (third-class) applicants and new applicants contributed greatly to total denials, reflecting again that new applicants are being screened for the first time. Almost half (45 percent) of all denied applicants indicated no previous FAA medical application had been made. Eighty-two percent of all denied applicants indicated nonaeronautical occupations on their application. Of the professional categories, the flight service station specialist and air traffic controller groups had the highest denial rates, with 18.6 and 18.1 per 1,000 applicants. Airline pilots were sixth highest of the occupationally connected airmen with a rate of 4.8 per 1,000 applicants.

Total flying time data also substantiated the contribution of new applicants to total denials with 51 percent of the denied applicants indicating less than 40 hours total flying time and 32 percent indicating no flying time.

For denials by pathology, an increasing overall denial rate for third class over second class and for second class over first class was observed. The most significant causes for denial (regardless of class applied for) were cardiovascular, miscellaneous pathology, neuropsychiatric, and, at a substantially lower level, eye pathology. These four categories are involved in 92 percent of all denials.

Cardiovascular causes resulted in the highest denial rate for males, while the miscellaneous pathology category provided the highest denial rate for females.

Epidemiologic findings are consistent with expectations and previous findings on denied airmen.

For airline pilots, annual age-specific denial rates increase to the highest rate at the age interval 55-59. The most significant causes for denial are cardiovascular, the miscellaneous category, and neuropsychiatric respectively. The importance of these categories, particularly over age 45, is again recognized.

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